



## IA Health Link Provider Networks Fact Sheet

### Contracting and Credentialing

Effective January 1, 2016, providers serving IA Health Link members will work directly with the managed care organizations (MCOs). Providers may contract with as many of the four selected MCOs as they wish. The MCOs may not prevent a provider from participating in more than one network. Providers are encouraged to complete the contracting process with MCOs as early as possible to ensure participation for services provided in January.

### Claims Process:

1. Beginning January 1, 2016, all claims for MCO-enrolled members must be submitted directly to the appropriate MCO, adhering to the MCO's claims submission and timeliness guidelines. The agency has directed that the MCO provider agreements will require that providers submit claims within 90 days if third party liability is not involved.
2. The MCOs will be required to pay the claims for covered Medicaid services to existing Medicaid providers, regardless of whether or not the provider is in network with the MCO (for six months or two years, depending on provider type, see below section). These claims will be reimbursed at the out of network rate which is 90 percent of the Medicaid floor or 90 percent of the FFS (fee-for-service) rate.
3. Providers should work with the MCOs to determine the policies and process for submitting both in and out of network claims for MCO members.
  - Only claims for Medicaid fee-for-service members should be submitted to Iowa Medicaid Enterprise. Please see the Iowa Medicaid Populations listed below for fee-for-service populations. The designated membership will be specified on the member's card.
4. Providers must obtain a current authorization from the MCO if their authorization has expired. The MCOs will honor existing authorizations for up to 90 days.
5. MCOs must offer providers reimbursement in accordance with the Agency designated floor. It is important to keep in mind that the MCO capitation rates were developed with historical data so there is limited ability to pay above this amount.

### Provider Network

In order to facilitate a smooth transition on January 1, 2016, each of the four managed care organizations (MCOs) must accept current Iowa Medicaid providers, as outlined below.

### Physical and Behavioral Health Care Providers

The MCOs must accept claims submitted for billable Medicaid services for all physical and behavioral health care providers currently enrolled with Iowa Medicaid until June 30, 2016. This includes providers who have not contracted with the MCO and are considered out of network. Note that the reimbursement rate for out of network providers is 90 percent of the Medicaid floor or 90 percent of the FFS rate.

Providers include:

- Physical health care providers (ex. Primary care, hospitals, specialists, etc.)
- Behavioral health care providers (excludes CMHCs and IDPH-funded substance abuse providers)
- Case managers and care coordinators



## Long Term Care and Home and Community-Based Services (HCBS) Providers

The MCOs must accept claims submitted for billable Medicaid services for all long term care and HCBS providers currently enrolled with Medicaid until December 31, 2017. This includes providers who have not contracted with the MCO and are considered out of network. Note that the reimbursement rate for out of network providers is 90 percent of the Medicaid floor or 90 percent of the FFS rate.

Providers include:

- Nursing facilities
- HCBS waiver and habilitation providers (case managers and care coordinators excluded)
- Community mental health centers (CMHCs)
- Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/ID)
- Health Homes
- Substance use disorder treatment programs also in the Iowa Department of Public Health-funded network

## MCO Contact Information

Managed Care Organization	Contact and Phone Number
Amerigroup Iowa, Inc.	Email: <a href="mailto:iowamedicaid@amerigroup.com">iowamedicaid@amerigroup.com</a> Phone: 1-855-789-7989
AmeriHealth Caritas Iowa, Inc.	Email: <a href="mailto:iowaProviderNetwork@amerihealthcaritas.com">iowaProviderNetwork@amerihealthcaritas.com</a> Phone: 1-855-287-7855
UnitedHealthcare Plan of the River Valley, Inc.	New Providers: <a href="mailto:iowaCommunityNetwork@uhc.com">iowaCommunityNetwork@uhc.com</a> Existing Providers: Contact your current contract manager
WellCare of Iowa, Inc.	Email: <a href="mailto:iowaNetwork@wellcare.com">iowaNetwork@wellcare.com</a> Phone: 1-855-599-3811

## Member Populations

MCO Populations	Iowa Medicaid Populations – Fee for Service
<ul style="list-style-type: none"><li>• Low income families and children</li><li>• <i>hawk-i</i></li><li>• Iowa Health and Wellness Plan</li><li>• Long Term Care</li><li>• Home and Community-Based Services Waivers</li></ul>	<ul style="list-style-type: none"><li>• PACE (member option)</li><li>• American Indian/Alaskan Native (member option)</li><li>• Medically Needy</li><li>• Programs where Medicaid pays premiums such as the Health Insurance Premium Payment Program (HIPP) and those eligible for the Medicare Savings Program only</li><li>• Undocumented persons eligible for short-term emergency services only</li><li>• Presumptive and retroactive eligibility</li></ul>

## Additional Questions and Information

Contact Iowa Medicaid Provider Services at 1-800-338-7909, 7:30 a.m. – 4:30 p.m., Monday- Friday, or by email at [IMEProviderServices@dhs.state.ia.us](mailto:IMEProviderServices@dhs.state.ia.us). More information can be found in the [IA Health Link Provider Toolkit](#)<sup>1</sup>.

<sup>1</sup> [https://dhs.iowa.gov/sites/default/files/IAHealthLink\\_ProviderToolkit\\_FINAL.PDF](https://dhs.iowa.gov/sites/default/files/IAHealthLink_ProviderToolkit_FINAL.PDF)